



SOLID WASTE PROCESSING FACILITY PERMIT RENEWAL APPLICATION

State Form 50387 (R2 / 10-04)
Indiana Department of Environmental Management

INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT
Solid Waste Permits Section
Office of Land Quality (N1154)
100 N. Senate Ave.
Indianapolis, IN 46204

INSTRUCTIONS This application form shall be used to apply for all solid waste processing facility permit renewals. Renewal application fees are established by IC 13 -20-21. Pursuant to IAC 11-9-4(a), this application must be received by the Commissioner of the Indiana Department of Environmental Management at least 120 days prior to the expiration date of your current permit. When completed, please return this form and support documents to the address given in the box above.

Section A. Permittee(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number ((xxx) xxx-xxxx)		

Section B. Facility Owners(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number ((xxx) xxx-xxxx)		

Section C. Operator(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number ((xxx) xxx-xxxx)		

Section D. Property Owner(s) Information

Name				
Address	Street	Apt. #	P.O. Box	Town/City
State	ZIP code	Telephone Number ((xxx) xxx-xxxx)		

Please note that in accordance with 329 IAC 11-11-4(b) the owner and operator of a solid waste facility, and the owner or owners of the land upon which the facility is located, shall be liable for any environmental harm caused by the facility.

Section E. Facility Information

Facility Name			Permit Number	
Mailing Address	Street	Apt. #	P.O. Box	Town/City
Facility Contact Person and Telephone Number (with area code)				
Type of Operation (please check one)				
Incinerator - 10 tons/day or greater		Transfer Station		
Infectious Waste Incinerator - 7 tons/day or greater		Other Solid Waste Processing Facility		
Type of Waste Received	Daily Amount Received - Cu Yds. or Tons per Day		Total Facility Acreage	

Section F. Names and Addresses of Affected Government Officials**1. Members of the board of county commissioners where facility is located**

Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code

2. Mayor(s) of any city(s) affected by the permit application

Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code

Section F. Names and Addresses of Affected Government Officials (continued)**3. President(s) of town council(s) of any town(s) affected by the permit application**

Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code
Typed Name	Typed Name
Typed Address	Typed Address
Typed Address	Typed Address
Typed City, State, ZIP code	Typed City, State, ZIP code

Please use additional sheets as needed to include all local officials affected by this permit application.

Section G. Attachments Required

1. A legal description (defined by 329 IAC 11-2-20) of the facility location, including acreage thereof.
2. A copy of the fee transmittal form and check for a renewal fee as established by IC 13-20-21. Submit each check and original of fee transmittal form to IDEM Cashier's Office to address shown on transmittal form.

Section H. Signatures and Certification Statements

329 IAC 11-9-3(d) requires that the signatory for a permit application sign the following certification statement:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that I am authorized to submit this information."

Applicant's Name & Title Typed	Applicant's Signature	Date Signed (mm/dd/yyyy)
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329 IAC 11-9-1(b) requires the owner of the land upon which a facility is located to sign the application form acknowledging the land owner's responsibility established in 329 IAC 11-11-4:

"I hereby certify that I am fully aware of my responsibilities established in 329 IAC 11-11-4 as owner of the land upon which a solid waste facility is located and shall be liable for any environmental harm caused by the facility."

Landowner's Name & Title Typed	Landowner's Signature	Date Signed (mm/dd/yyyy)
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